

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Walrond for Congress

ADDRESS (number and street)

PO Box 217

Check if different
than previously
reported. (ACC)

New York

NY

10030

2. FEC IDENTIFICATION NUMBER ▼

C

C00552356

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NY

13

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

01

Y Y Y Y

2014

through

M M / D D / Y Y Y Y

03

D D / Y Y Y Y

31

Y Y Y Y

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Torian Robinson

Signature of Treasurer

Torian Robinson

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

15

Y Y Y Y

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 78

Write or Type Committee Name

WalronD for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	64860.20	147825.76
(b) Total Contribution Refunds (from Line 20(d))	1008.40	1008.40
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	63851.80	146817.36
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	67006.36	71949.76
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	15.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	67006.36	71934.76
8. Cash on Hand at Close of Reporting Period (from Line 27).....	74882.60	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 78

Write or Type Committee Name

Walrond for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

38571.00

100274.42

(ii) Unitemized.....

25091.65

44661.65

(iii) TOTAL of contributions from individuals ▶

63662.65

144936.07

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

1197.55

2889.69

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

64860.20

147825.76

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

0.00

15.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

64860.20

147840.76

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 78

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	67006.36	71949.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1008.40	1008.40
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1008.40	1008.40
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	68014.76	72958.16

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	78037.16
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	64860.20
25. SUBTOTAL (add Line 23 and Line 24).....	142897.36
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	68014.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	74882.60

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 78

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

Douglas Adams

A.

Mailing Address 136 W 131st St

City

New York

State

NY

Zip Code

10027-2031

FEC ID number of contributing
federal political committee.

C

Name of Employer

New York Hilton Midtown

Occupation

Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1010.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : VNHZ8C6QFX9

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

Adeola Adejobi

B.

Mailing Address 304 W 117th St

Apt 2A

City

New York

State

NY

Zip Code

10026-1573

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Royal Worldview International Properti

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : VNHZ8CFB3X6

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Martin Adler

C.

Mailing Address 2255 E 70th St

City

Brooklyn

State

NY

Zip Code

11234-6505

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sclar Adler LLP

Occupation

Partner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		30		2014

Transaction ID : VNHZ8CJWMC9

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

535.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial)
James Alston

Mailing Address 458 Colonial Ter

City State Zip Code
 Hackensack NJ 07601-1402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Retired Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2014

Transaction ID : VNHZ8CGC7F5

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Brian Benjamin

Mailing Address 15 W 116th St
 Apt 2A

City State Zip Code
 New York NY 10026-2797

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Benjamin Capital Solutions Consultant

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2014

Transaction ID : VNHZ8CDDHY6

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Dretcher Bradley

Mailing Address 45 N Ocean Ave
 Apt 3G

City State Zip Code
 Freeport NY 11520-3026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 JP Morgan Chase Account Manager

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2014

Transaction ID : VNHZ8C6QK41

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2760.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walrond for Congress

Full Name (Last, First, Middle Initial) Lynn Brown		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2014
Mailing Address 2289 5th Ave Apt 4T		Transaction ID : VNHZ8CJWGN1
City New York	State NY	
Zip Code 10037-1704		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 520.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 520.00	

Full Name (Last, First, Middle Initial) Kristen Chard		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 36 Convent Ave Apt 17		Transaction ID : VNHZ8CE62S3
City New York	State NY	
Zip Code 10027-2640		Amount of Each Receipt this Period 750.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer Google	Occupation Account Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) Keiona Cherry		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 55 La Salle St 21 h		Transaction ID : VNHZ8CE35X5
City New York	State NY	
Zip Code 10027-4770		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Starbucks	Occupation Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	820.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial) Julius L. Christian		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>28</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02		28		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
02		28		2014									
Mailing Address 950 Evergreen Ave Apt 17A		Transaction ID : VNHZ8CBZ7C2											
City Bronx	State NY	Zip Code 10479											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>20.00</div>											
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>370.00</div>												
B. Full Name (Last, First, Middle Initial) Julius L. Christian		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>02</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		02		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
03		02		2014									
Mailing Address 950 Evergreen Ave Apt 17A		Transaction ID : VNHZ8CJWGM3											
City Bronx	State NY	Zip Code 10479											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>20.00</div>											
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>390.00</div>												
C. Full Name (Last, First, Middle Initial) Donald Coleman		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>22</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	01		22		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
01		22		2014									
Mailing Address 45 Park Ave Apt 401		Transaction ID : VNHZ8C2GAY3											
City New York	State NY	Zip Code 10016-3488											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>1000.00</div>											
Name of Employer Global Hue	Occupation CEO/Chairman												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>1000.00</div>												
SUBTOTAL of Receipts This Page (optional).....		<div>1040.00</div>											
TOTAL This Period (last page this line number only).....		<div></div>											

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Betty Davis

Mailing Address 485 Malcolm X Blvd

Apt 13C

City

New York

State

NY

Zip Code

10037-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Information Technology Architect

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2905.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		29		2014

Transaction ID : VNHZ8CGBCB7

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Monique Davis

Mailing Address 255 Huguenot St

City

New Rochelle

State

NY

Zip Code

10801-6386

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avon Products Inc

Occupation

Brand Manager Marketing

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		24		2014

Transaction ID : VNHZ8C352E5

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

C. Leevert Dennard

Mailing Address 2177 Frederick Douglass Blvd

City

New York

State

NY

Zip Code

10026-1143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unemployed

Occupation

Unemployed

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		09		2014

Transaction ID : VNHZ8CCD6C1

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

775.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 78

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Aaron S. Dennis

Mailing Address 547 W 147th St

Apt F1

City

New York

State

NY

Zip Code

10031-4444

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		19		2014

Transaction ID : VNHZ8CFSB06

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Aaron S. Dennis

Mailing Address 547 W 147th St

Apt F1

City

New York

State

NY

Zip Code

10031-4444

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2014

Transaction ID : VNHZ8CGCWM8

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Aaron S. Dennis

Mailing Address 547 W 147th St

Apt F1

City

New York

State

NY

Zip Code

10031-4444

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2014

Transaction ID : VNHZ8CGCWQ1

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

140.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 78

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walrond for CongressFull Name (Last, First, Middle Initial)
A. Dara Lynn Dratel Sclar

Mailing Address 444 E 17th St

City	State	Zip Code
Brooklyn	NY	11226-6606

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnemployedOccupation
Unemployed

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2014

Transaction ID : VNHZ8CJWM95

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)
B. Sharon EdwardsMailing Address 920 Metcalf Ave
Apt 17F

City	State	Zip Code
Bronx	NY	10473-4027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Planned ParenthoodOccupation
Accountant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2014

Transaction ID : VNHZ8CJW890

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)
C. Sharon EdwardsMailing Address 920 Metcalf Ave
Apt 17F

City	State	Zip Code
Bronx	NY	10473-4027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Planned ParenthoodOccupation
Accountant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2014

Transaction ID : VNHZ8CE6330

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2575.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial) Sharon Edwards		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2014	
Mailing Address 920 Metcalf Ave Apt 17F		Transaction ID : VNHZ8CGCW77	
City Bronx	State NY	Zip Code 10473-4027	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Name of Employer Planned Parenthood	
Occupation Accountant		Election Cycle-to-Date 1200.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
B. Full Name (Last, First, Middle Initial) Cheryl Faye Smith		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 200 W 136th St Apt 2B		Transaction ID : VNHZ8C6QGG7	
City New York	State NY	Zip Code 10030-2698	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Name of Employer Morgan, Lewis, and Brockius LLP	
Occupation Legal Secretary		Election Cycle-to-Date 660.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
C. Full Name (Last, First, Middle Initial) Cheryl Faye Smith		Date of Receipt M M / D D / Y Y Y Y 02 / 07 / 2014	
Mailing Address 200 W 136th St Apt 2B		Transaction ID : VNHZ8C6TFG0	
City New York	State NY	Zip Code 10030-2698	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Name of Employer Morgan, Lewis, and Brockius LLP	
Occupation Legal Secretary		Election Cycle-to-Date 710.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
SUBTOTAL of Receipts This Page (optional).....		160.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial)
Cheryl Faye Smith

Mailing Address 200 W 136th St
 Apt 2B

City State Zip Code
 New York NY 10030-2698

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Morgan, Lewis, and Brockius LLP Legal Secretary

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 755.00

Date of Receipt

M M / D D / Y Y Y Y
 02 23 2014

Transaction ID : VNHZ8CJW3C1

Amount of Each Receipt this Period

45.00

B. Full Name (Last, First, Middle Initial)
Wanda Fields

Mailing Address 48 Macombs Pl
 Apt 2A

City State Zip Code
 New York NY 10039-1861

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Bowery Resident's Committee Case Management

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 150.00

Date of Receipt

M M / D D / Y Y Y Y
 01 02 2014

Transaction ID : VNHZ8C6X2Z5

Amount of Each Receipt this Period

50.00

C. Full Name (Last, First, Middle Initial)
Wanda Fields

Mailing Address 48 Macombs Pl
 Apt 2A

City State Zip Code
 New York NY 10039-1861

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Bowery Resident's Committee Case Management

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 200.00

Date of Receipt

M M / D D / Y Y Y Y
 02 13 2014

Transaction ID : VNHZ8C99T34

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

145.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial) Wanda Fields		Date of Receipt M M / D D / Y Y Y Y 03 / 01 / 2014
Mailing Address 48 Macombs Pl Apt 2A City New York State NY Zip Code 10039-1861		Transaction ID : VNHZ8CJW7J8
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Bowery Resident's Committee	Occupation Case Management	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 215.00	

B. Full Name (Last, First, Middle Initial) Robin Fleshman		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1124 Tinton Ave City Bronx State NY Zip Code 10456-5569		Transaction ID : VNHZ8CGZ2B3
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Children's Aid Society	Occupation Deputy Director	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

C. Full Name (Last, First, Middle Initial) Charisse Ford		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 163 Saint Nicholas Ave Apt 6I City New York State NY Zip Code 10026-1226		Transaction ID : VNHZ8CFS8D0
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Estee Lauder	Occupation Marketing	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	3115.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial) Kiwana Francis		Date of Receipt M M / D D / Y Y Y Y 01 / 08 / 2014	
Mailing Address 2615 Grand Concourse Apt 4E		Transaction ID : VNHZ8C6X3H7	
City Bronx	State NY	Zip Code 10468-4435	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer DOE	Occupation Teacher		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		
B. Full Name (Last, First, Middle Initial) Kiwana Francis		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 2615 Grand Concourse Apt 4E		Transaction ID : VNHZ8C6QGF1	
City Bronx	State NY	Zip Code 10468-4435	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer DOE	Occupation Teacher		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 120.00		
C. Full Name (Last, First, Middle Initial) Kiwana Francis		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2014	
Mailing Address 2615 Grand Concourse Apt 4E		Transaction ID : VNHZ8CE6314	
City Bronx	State NY	Zip Code 10468-4435	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer DOE	Occupation Teacher		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 220.00		
SUBTOTAL of Receipts This Page (optional).....		220.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Willie Francois

Mailing Address 630 Malcolm X Blvd

Apt 1A

City

New York

State

NY

Zip Code

10037-1247

FEC ID number of contributing
federal political committee.

C

Name of Employer

First Corinthian Baptist Church

Occupation

Minister

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		20		2014

Transaction ID : VNHZ8C6X3M1

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. David Gedzelman

Mailing Address 301 W 115th St

Apt 6F

City

New York

State

NY

Zip Code

10026-1591

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Steinhardt Foundation for Jewish L

Occupation

Rabbi and Foundation Executive

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		30		2014

Transaction ID : VNHZ8C3PK88

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Karenn Gore

Mailing Address 100 W 80th St

City

New York

State

NY

Zip Code

10024-6343

FEC ID number of contributing
federal political committee.

C

Name of Employer

Union Theological Seminary

Occupation

Director of Union Forum/Global Social

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Transaction ID : VNHZ8CFRZT3

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

1000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial)
Mary Green Pearson
 Mailing Address 676 Saint Nicholas Ave

City State Zip Code
 New York NY 10030-1036

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1200.00

Date of Receipt

M M / D D / Y Y Y Y
 03 29 2014

Transaction ID : VNHZ8CGD0Y5

Amount of Each Receipt this Period

200.00

B. Full Name (Last, First, Middle Initial)
Lisa Grosbard
 Mailing Address 2643 National Dr

City State Zip Code
 Brooklyn NY 11234-6916

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Information Requested

Occupation
 Teacher

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt

M M / D D / Y Y Y Y
 03 30 2014

Transaction ID : VNHZ8CJWM62

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Michelle Hardy
 Mailing Address 2333 5th Ave
 Apt 2C

City State Zip Code
 New York NY 10037-1609

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Merck & Co

Occupation
 Sales

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1120.00

Date of Receipt

M M / D D / Y Y Y Y
 01 29 2014

Transaction ID : VNHZ8C6QJE7

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1220.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walrond for Congress

Full Name (Last, First, Middle Initial)
Frederick Haynes

Mailing Address 6846 Talbot Pkwy

City State Zip Code
 Dallas TX 75232-3319

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Friendship West Baptist Church

Occupation
 Clergy

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 03 31 2014

Transaction ID : VNHZ8CH3647

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)
Aaron Holloway

Mailing Address 245 Malcolm X Blvd
 Apt 2

City State Zip Code
 New York NY 10027-5655

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Fried Frank

Occupation
 Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y
 03 25 2014

Transaction ID : VNHZ8CGH330

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)
Jamal Joseph

Mailing Address 92 Saint Nicholas Ave
 Apt 5-H

City State Zip Code
 New York NY 10026-2943

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Columbia University

Occupation
 Professor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y
 03 27 2014

Transaction ID : VNHZ8CG0GB8

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walrond for Congress

Full Name (Last, First, Middle Initial) A. Sharon Joseph		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 226 W 140th St Apt 3B		Transaction ID : VNHZ8C6QFD2
City New York	State NY	
Zip Code 10030-3402		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer First Corinthian Baptist Church	Occupation Admin. Assistant	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 520.00	

Full Name (Last, First, Middle Initial) B. Sharon Joseph		Date of Receipt M M / D D / Y Y Y Y 03 / 08 / 2014
Mailing Address 226 W 140th St Apt 3B		Transaction ID : VNHZ8CBYMD9
City New York	State NY	
Zip Code 10030-3402		Amount of Each Receipt this Period 111.00
FEC ID number of contributing federal political committee. C		
Name of Employer First Corinthian Baptist Church	Occupation Admin. Assistant	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 631.00	

Full Name (Last, First, Middle Initial) C. Jacqueline Kidd		Date of Receipt M M / D D / Y Y Y Y 03 / 01 / 2014
Mailing Address 454 Manhattan Ave		Transaction ID : VNHZ8CBZ3P2
City New York	State NY	
Zip Code 10026		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Self Employed	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 220.00	

SUBTOTAL of Receipts This Page (optional).....	151.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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PAGE 21 OF 78

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial) Irina Kontorovich		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		31		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
03		31		2014									
Mailing Address 2821 W 12th St Apt 18C		Transaction ID : VNHZ8CJJ5B0											
City Brooklyn	State NY	Zip Code 11224-3129											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00											
Name of Employer Maximillion Realty Inc	Occupation Real Estate Agent												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00												
B. Full Name (Last, First, Middle Initial) Irina Kontorovich		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		31		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
03		31		2014									
Mailing Address 2821 W 12th St Apt 18C		Transaction ID : VNHZ8CJJ6A5											
City Brooklyn	State NY	Zip Code 11224-3129											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2480.00											
Name of Employer Maximillion Realty Inc	Occupation Real Estate Agent												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00												
C. Full Name (Last, First, Middle Initial) Latica Lamar		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>23</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02		23		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
02		23		2014									
Mailing Address 286 W 147th St 4C		Transaction ID : VNHZ8CBZ2M5											
City New York	State NY	Zip Code 10039-3602											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00											
Name of Employer NYC Dept of Homeless Services	Occupation Supervisor												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 280.00												
SUBTOTAL of Receipts This Page (optional).....		2530.00											
TOTAL This Period (last page this line number only).....													

FOR LINE NUMBER:		PAGE 22 OF 78	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

NAME OF COMMITTEE (In Full)
Walrond for Congress

Date of Receipt

MM / DD / YYYY

03 / 29 / 2014

Amount of Each Receipt this Period

Receipt	Amount
1	10.00
2	20.00
3	30.00
4	40.00
5	50.00

Date of Receipt

MM / DD / YYYY

03 / 03 / 2014

Amount of Each Receipt this Period

Receipt	Amount
1	100.00
2	150.00
3	200.00
4	250.00
5	300.00
6	350.00
7	400.00
8	450.00
9	500.00
10	550.00

Date of Receipt

MM / DD / YYYY

03 / 04 / 2014

Amount of Each Receipt this Period

Receipt	Amount
1	15.00
2	15.00
3	15.00
4	15.00
5	15.00
6	15.00
7	15.00
8	15.00
9	15.00
10	15.00

615.00

FEC Schedule A (Form 3) (Revised 02/2009)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walrond for Congress

Full Name (Last, First, Middle Initial) A. Joy Lindsay		Date of Receipt M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 11-15 Clinton St Apt 2E		Transaction ID : VNHZ8C70B28
City Newark	State NJ	
Zip Code 07102-3732		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		350.00
Name of Employer Newark Public Schools	Occupation Staffing Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) B. Joy Lindsay		Date of Receipt M M / D D / Y Y Y Y 02 / 09 / 2014
Mailing Address 11-15 Clinton St Apt 2E		Transaction ID : VNHZ8C8P377
City Newark	State NJ	
Zip Code 07102-3732		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		375.00
Name of Employer Newark Public Schools	Occupation Staffing Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 375.00	

Full Name (Last, First, Middle Initial) C. Ebone McIntosh Carrington		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2014
Mailing Address 68 Bradhurst Ave Apt 8J		Transaction ID : VNHZ8CJWFN8
City New York	State NY	
Zip Code 10039-3311		Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C		1035.00
Name of Employer Health and Hospitals Corporation	Occupation Administrator	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1035.00	

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

Ebone McIntosh Carrington

Mailing Address 68 Bradhurst Ave

Apt 8J

City

New York

State

NY

Zip Code

10039-3311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Health and Hospitals Corporation

Occupation

Administrator

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1135.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : VNHZ8CG1DP7

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Reggie McKnight

Mailing Address 5422 Freestone Dr

City

Charlotte

State

NC

Zip Code

28216-2760

FEC ID number of contributing
federal political committee.

C

Name of Employer

McKnight Law

Occupation

Attorney

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		20		2014

Transaction ID : VNHZ8CF5H57

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Reggie McKnight

Mailing Address 5422 Freestone Dr

City

Charlotte

State

NC

Zip Code

28216-2760

FEC ID number of contributing
federal political committee.

C

Name of Employer

McKnight Law

Occupation

Attorney

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Transaction ID : VNHZ8CF5H65

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial)
Edward Mermelstein

Mailing Address 302 5th Ave

City State Zip Code
New York NY 10001-3604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Rheem, Bell and Mermelstein Attorney

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2014

Transaction ID : VNHZ8CJJ561

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
Sandra Meyers

Mailing Address 2741 Sedgwick Ave

City State Zip Code
Bronx NY 10468-3120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt

M M / D D / Y Y Y Y
03 02 2014

Transaction ID : VNHZ8CJFWF3

Amount of Each Receipt this Period

20.00

C. Full Name (Last, First, Middle Initial)
Robert Morris

Mailing Address 515 E 72nd St
Apt 7B

City State Zip Code
New York NY 10021-4066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self employed Sales

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2014

Transaction ID : VNHZ8CJJ3Z4

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5020.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial) Kenneth Morrison		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	01		24		2014
M M M	/	D D D	/	Y Y Y Y Y									
01		24		2014									
Mailing Address 302A W 121st St Apt 1		Transaction ID : VNHZ8C351M1											
City New York	State NY	Zip Code 10027-6134											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00											
Name of Employer Lemor Realty	Occupation Real Estate												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00												
B. Full Name (Last, First, Middle Initial) Mary H Murry		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	01		29		2014
M M M	/	D D D	/	Y Y Y Y Y									
01		29		2014									
Mailing Address 2052 Pitman Ave Ph		Transaction ID : VNHZ8C6QFC5											
City Bronx	State NY	Zip Code 10466-1927											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00											
Name of Employer Bronx Surrogates Court	Occupation Senior Surrogates Court Clerk												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 270.00												
C. Full Name (Last, First, Middle Initial) Dorothy Odom		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	01		29		2014
M M M	/	D D D	/	Y Y Y Y Y									
01		29		2014									
Mailing Address 1295 5th Ave Apt 31B		Transaction ID : VNHZ8C6QGZ5											
City New York	State NY	Zip Code 10029-3134											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00											
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 280.00												
SUBTOTAL of Receipts This Page (optional).....		2650.00											
TOTAL This Period (last page this line number only).....													

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

Ernest Olkhovetskiy

A.

Mailing Address 2820 W 8th St

Apt 6H

City

Brooklyn

State

NY

Zip Code

11224-3356

FEC ID number of contributing
federal political committee.

C

Name of Employer

Johnson Communications

Occupation

Technician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : VNHZ8CJJ3Y7

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

Hedy Perry

B.

Mailing Address PO Box 374

City

New York

State

NY

Zip Code

10027-0374

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : VNHZ8C6QJM4

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

Hedy Perry

C.

Mailing Address PO Box 374

City

New York

State

NY

Zip Code

10027-0374

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		30		2014

Transaction ID : VNHZ8CJH3T6

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2620.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Walrond for Congress

Full Name (Last, First, Middle Initial) Torian Robinson		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 5057 Broadway Apt 25		Transaction ID : VNHZ8CET422
City New York	State NY	
Zip Code 10034-1121		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer NAACP Legal Defense Fund	Occupation Fundraiser	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

Full Name (Last, First, Middle Initial) Torian Robinson		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 5057 Broadway Apt 25		Transaction ID : VNHZ8CG9BZ7
City New York	State NY	
Zip Code 10034-1121		Amount of Each Receipt this Period 120.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 220.00
Name of Employer NAACP Legal Defense Fund	Occupation Fundraiser	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 220.00	

Full Name (Last, First, Middle Initial) Maria Veronica Salenda		Date of Receipt M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 141 W 128th St Apt 4		Transaction ID : VNHZ8C352H8
City New York	State NY	
Zip Code 10027-3024		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer City Year	Occupation Managing Director	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	395.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial) Sclar Adler LLP		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 140 Broadway FL 46		Transaction ID : VNHZ8CJWM20	
City New York	State NY	Zip Code 10005-1155	Amount of Each Receipt this Period 1600.00
FEC ID number of contributing federal political committee. C		PARTNERSHIP--partners below if itemized	
Name of Employer Occupation		Election Cycle-to-Date 1600.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM] *	
B. Full Name (Last, First, Middle Initial) Alan Sclar		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 444 E 17th St		Transaction ID : VNHZ8CJWM54	
City Brooklyn	State NY	Zip Code 11226-6606	Amount of Each Receipt this Period 1600.00
FEC ID number of contributing federal political committee. C		[MEMO ITEM] *	
Name of Employer Occupation Sclar Adler LLP Partner		Election Cycle-to-Date 1600.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM] *	
C. Full Name (Last, First, Middle Initial) Harriet Sealy		Date of Receipt M M / D D / Y Y Y Y 01 / 01 / 2014	
Mailing Address 1629 E 94th St		Transaction ID : VNHZ8C6X3T8	
City Brooklyn	State NY	Zip Code 11236-5223	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer Occupation JPMorgan Chase Bank Banker		Election Cycle-to-Date 200.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period 1800.00	
SUBTOTAL of Receipts This Page (optional).....		Amount of Each Receipt this Period 1800.00	
TOTAL This Period (last page this line number only).....		Amount of Each Receipt this Period	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial)
Harriet Sealy

Mailing Address 1629 E 94th St

City State Zip Code
Brooklyn NY 11236-5223

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JPMorgan Chase Bank Banker

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : VNHZ8C6QJK6

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)
Lynda Serene-Jones

Mailing Address 99 Claremont Ave
Apt 402

City State Zip Code
New York NY 10027-5707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Union Theological Seminary President

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Transaction ID : VNHZ8CFRY17

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Michael Shay

Mailing Address 24 Stuart Ct

City State Zip Code
Hampton Bays NY 11946-4108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sclar Adler LLP Partner

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : VNHZ8CJWM79

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1050.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

Crystal Sidberry-Turner**A.**

Mailing Address 2434 Middleberry Cloister

City

Douglasville

State

GA

Zip Code

30135-8131

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Credentialing Concierge, LLC

Occupation

President/ CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2014

Transaction ID : VNHZ8C2EB85

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Cheryl Smith**B.**Mailing Address 200 W 136th St
Apt 2B

City

New York

State

NY

Zip Code

10030-2698

FEC ID number of contributing
federal political committee.

C

Name of Employer

Morgan Lewis and Bockius

Occupation

Legal Secretary

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2014

Transaction ID : VNHZ8CG1F64

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Samantha Smith**C.**Mailing Address 131 W 112th St
Apt 1A

City

New York

State

NY

Zip Code

10026-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interfaith Medical Center

Occupation

Outreach coordinator

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2014

Transaction ID : VNHZ8CAQW31

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

375.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial)
Samantha Smith

Mailing Address 131 W 112th St
Apt 1A

City State Zip Code
New York NY 10026-3702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Interfaith Medical Center Outreach coordinator

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt

M M / D D / Y Y Y Y
03 15 2014

Transaction ID : VNHZ8CE64D2

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Eddie Sparkman

Mailing Address 101 W 128th St

City State Zip Code
New York NY 10027-3003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Attitude New York Chauffeur

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

M M / D D / Y Y Y Y
03 29 2014

Transaction ID : VNHZ8CGCVN5

Amount of Each Receipt this Period

2100.00

C. Full Name (Last, First, Middle Initial)
Kevin Swann

Mailing Address 7 Denver Cir

City State Zip Code
Hampton VA 23666-1610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ivy Baptist Church Pastor

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M / D D / Y Y Y Y
01 04 2014

Transaction ID : VNHZ8C6X311

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial) Terri Tildon		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>16</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	01		16		2014
M M M	/	D D D	/	Y Y Y Y Y									
01		16		2014									
Mailing Address 257 W 116th St Apt 5A		Transaction ID : VNHZ8C8P351											
City New York	State NY	Zip Code 10026-4915											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00											
Name of Employer FEDCAP	Occupation Evaluator												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00												
B. Full Name (Last, First, Middle Initial) Terri Tildon		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	01		29		2014
M M M	/	D D D	/	Y Y Y Y Y									
01		29		2014									
Mailing Address 257 W 116th St Apt 5A		Transaction ID : VNHZ8C6QH61											
City New York	State NY	Zip Code 10026-4915											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00											
Name of Employer FEDCAP	Occupation Evaluator												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00												
C. Full Name (Last, First, Middle Initial) Terri Tildon		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>23</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		23		2014
M M M	/	D D D	/	Y Y Y Y Y									
02		23		2014									
Mailing Address 257 W 116th St Apt 5A		Transaction ID : VNHZ8C9YN96											
City New York	State NY	Zip Code 10026-4915											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00											
Name of Employer FEDCAP	Occupation Evaluator												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 420.00												
SUBTOTAL of Receipts This Page (optional).....		170.00											
TOTAL This Period (last page this line number only).....													

FOR LINE NUMBER:
(check only one)

NAME OF COMMITTEE (In Full)
Walrond for Congress

250.00

15.00

10.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 35 OF 78

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walrond for Congress

A. Full Name (Last, First, Middle Initial) Dencita Walrond		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014	
Mailing Address 45 N Ocean Ave Apt 3G City State Zip Code Freeport NY 11520-3026		Transaction ID : VNHZ8CG15J8	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer NCO FINANCIAL GROUP		Occupation COLLECTOR	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1410.00	
B. Full Name (Last, First, Middle Initial) Evelyn Wande		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 2470 8th Ave Apt 5B City State Zip Code New York NY 10027-7730		Transaction ID : VNHZ8CH3724	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Verizon		Occupation Process Engineer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 450.00	
C. Full Name (Last, First, Middle Initial) Beatrice Watson		Date of Receipt M M / D D / Y Y Y Y 02 / 08 / 2014	
Mailing Address 1925 Adam Clayton Powell Jr Blvd 4CI City State Zip Code New York NY 10026-2213		Transaction ID : VNHZ8C8P336	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Information Requested		Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional).....		700.00	
TOTAL This Period (last page this line number only).....			

X	11a		11b		11c		11d		
	12		13a		13b		14		15

NAME OF COMMITTEE (In Full)
Walrond for Congress

1000.00

250.00

250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 37 OF 78

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walrond for Congress

Full Name (Last, First, Middle Initial)

Flora Wilson Bridges

Mailing Address 83 Franklin Ave

City

Harrison

State

NY

Zip Code

10528-3542

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rendall Memorial Presbyterian Church

Occupation

Minister and Professor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		15		2014

Transaction ID : VNHZ8CJH384

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

38571.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 78

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	-------------------------------------	---	-----------------------------

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NAME OF COMMITTEE (In Full)
Walrond for Congress

Full Name (Last, First, Middle Initial) A. Michael Walrond		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 24 / 2014
Mailing Address 1485 5th Ave Apt 18J		Transaction ID : VNHZ8C65A99
City New York	State NY	
Zip Code 10035-2778		Amount of Each Receipt this Period 1197.55
FEC ID number of contributing federal political committee. C H4NY13050		* In-Kind: Signs for Campaign Event
Name of Employer FCBC	Occupation pastor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2889.69	

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional)	1197.55
TOTAL This Period (last page this line number only)	1197.55

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Desiree AllenMailing Address 775 Eagle Ave
Apt 4KCity State Zip Code
Bronx NY 10456-7914Purpose of Disbursement
transportation

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	02	2014

Amount of Each Disbursement this Period

210.30

Transaction ID : VNH009QB0M3

B. Dial 7

Mailing Address 4323 35th St

City State Zip Code
Long Island City NY 11101-2303Purpose of Disbursement
Transportation to Campaign Event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	29	2014

Amount of Each Disbursement this Period

210.30

Transaction ID : VNH009S06G3

[MEMO ITEM]

*

c. Amtrak.com

Mailing Address 50 Massachusetts Ave NE

City State Zip Code
Washington DC 20002-4214Purpose of Disbursement
Train Ticket to Fundraiser

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	19	2014

Amount of Each Disbursement this Period

204.00

Transaction ID : VNH009RWSB2

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

414.30

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address 81 W 125th St

City	State	Zip Code
New York	NY	10027-4512

Purpose of Disbursement
Campaign Phone

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2014

Amount of Each Disbursement this Period

174.18

Transaction ID : VNH009R1135

Campaign Phone

B. AT&T

Full Name (Last, First, Middle Initial)

Mailing Address 81 W 125th St

City	State	Zip Code
New York	NY	10027-4512

Purpose of Disbursement
campaign phone

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2014

Amount of Each Disbursement this Period

50.00

Transaction ID : VNH009RGH10

c. atlas direct mail

Full Name (Last, First, Middle Initial)

Mailing Address 4112 38th St

City	State	Zip Code
Long Island City	NY	11101-1709

Purpose of Disbursement
Printing

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2014

Amount of Each Disbursement this Period

952.66

Transaction ID : VNH009RMQX7

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1176.84

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Chris Bishop

Mailing Address 419 Briarpatch Ln

City	State	Zip Code
Charlotte	NC	28211-4142

Purpose of Disbursement
Volunteer Trainer

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : VNH009RC626

B. c gee

Mailing Address 273 Bay 41st St

City	State	Zip Code
Brooklyn	NY	11214-6611

Purpose of Disbursement
Artist Labor and Art Supplies

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

Amount of Each Disbursement this Period

1100.00

Transaction ID : VNH009QB0C0

c. Amanda Caragliano

Mailing Address 104 Carpenter Pl

City	State	Zip Code
Cranford	NJ	07016-2542

Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		22		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : VNH009RT3C6

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3100.00

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 OF 78

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Amanda Caragliano

Mailing Address 104 Carpenter Pl

City Cranford State NJ Zip Code 07016-2542

Purpose of Disbursement
Salary

001

Category/
Type

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 31 / 2014

Amount of Each Disbursement this Period

500.00

Transaction ID : VNH009RZ0G2

Full Name (Last, First, Middle Initial)

B. Corner Social

Mailing Address 321 Malcolm X Blvd

City New York State NY Zip Code 10027-3703

Purpose of Disbursement
Meal for Volunteers

007

Category/
Type

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 13 / 2014

Amount of Each Disbursement this Period

231.98

Transaction ID : VNH009R16W3

Full Name (Last, First, Middle Initial)

c. Dial 7

Mailing Address 4323 35th St

City Long Island City State NY Zip Code 11101-2303

Purpose of Disbursement
Transportation from Campaign Event

002

Category/
Type

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 29 / 2014

Amount of Each Disbursement this Period

172.50

Transaction ID : VNH009QB0K5

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

904.48

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Dister DesignsMailing Address 500 W 173rd St
Apt 2BCity State Zip Code
New York NY 10032-1654Purpose of Disbursement
Artist for Campaign Announcement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	02	2014

Amount of Each Disbursement this Period

400.00

Transaction ID : VNH009QRNX1

B. Domino's Pizza LLC

Mailing Address 777 St Nicholas Ave

City State Zip Code
New York NY 10026Purpose of Disbursement
Volunteer Training Lunch

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	08	2014

Amount of Each Disbursement this Period

288.71

Transaction ID : VNH009R10X8

Volunteer Training Lunch

c. Domino's Pizza LLC

Mailing Address 777 St Nicholas Ave

City State Zip Code
New York NY 10026Purpose of Disbursement
Volunteer Training Lunch

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	08	2014

Amount of Each Disbursement this Period

5.99

Transaction ID : VNH009R10Y6

Volunteer Training Lunch

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

694.70

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Dream Center

Mailing Address 203-205 W 119th st

City	State	Zip Code
New York	NY	10027

Purpose of Disbursement
Laptop Rental

007

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2014

Amount of Each Disbursement this Period

275.00

Transaction ID : VNH009RC6P2

B. Dunkin Donuts

Mailing Address 525 Lenox Ave

City	State	Zip Code
New York	NY	10039

Purpose of Disbursement
Breakfast for Volunteers

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		23		2014

Amount of Each Disbursement this Period

24.58

Transaction ID : VNH009RF001

c. Dunkin Donuts

Mailing Address 525 Lenox Ave

City	State	Zip Code
New York	NY	10039

Purpose of Disbursement
Breakfast for Volunteer Training

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

177.01

Transaction ID : VNH009REZK9

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

476.59

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Dunkin Donuts

Mailing Address 525 Lenox Ave

City	State	Zip Code
New York	NY	10039

Purpose of Disbursement
Breakfast for Volunteer Training

001

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

29.97

Transaction ID : VNH009REZS6

B. FedEx Office

Mailing Address 1122 Lexington Ave

City	State	Zip Code
New York	NY	10075-0349

Purpose of Disbursement
Printing and Copying

006

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

Amount of Each Disbursement this Period

908.02

Transaction ID : VNH009RC6F7

c. FedEx Office

Mailing Address 1122 Lexington Ave

City	State	Zip Code
New York	NY	10075-0349

Purpose of Disbursement
copying and printing

006

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2014

Amount of Each Disbursement this Period

212.65

Transaction ID : VNH009RC6E9

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1150.64

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. FedEx Office

Mailing Address 1122 Lexington Ave

City	State	Zip Code
New York	NY	10075-0349

Purpose of Disbursement
Printing and Copying

006

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 28 / 2014

Amount of Each Disbursement this Period

1289.08

Transaction ID : VNH009RC5S5

B. First Corinthian Baptist Church

Mailing Address 1912 Adam Clayton Powell Jr Blvd

City	State	Zip Code
New York	NY	10026-2815

Purpose of Disbursement
Table and Chair rental

007

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 29 / 2014

Amount of Each Disbursement this Period

350.00

Transaction ID : VNH009Q87W0

c. Tracy Fortson

Mailing Address 523 Timpson Pl

City	State	Zip Code
Bronx	NY	10455-5017

Purpose of Disbursement
Campain Event Supplies

007

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 29 / 2014

Amount of Each Disbursement this Period

594.92

Transaction ID : VNH009QB0G1

SUBTOTAL of Disbursements This Page (optional).....

2234.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
Camapaign Event Supplies

007

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

Amount of Each Disbursement this Period

401.17

Transaction ID : VNH009QB0H9

[MEMO ITEM]

*

B. Tracy Fortson

Mailing Address 523 Timpson Pl

City	State	Zip Code
Bronx	NY	10455-5017

Purpose of Disbursement
Campain Event Supplies

007

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

32.61

Transaction ID : VNH009REZW0

c. Jerry Goldfeder

Mailing Address 180 Maiden Ln

City	State	Zip Code
New York	NY	10038-4925

Purpose of Disbursement
Retainer for Legal Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2014

Amount of Each Disbursement this Period

3500.00

Transaction ID : VNH009RT3D4

SUBTOTAL of Disbursements This Page (optional).....

3532.61

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Hampton Inn and Suites

Mailing Address 25 Chapel St

City	State	Zip Code
Albany	NY	12210-2733

Purpose of Disbursement
Hotel

002

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2014

Amount of Each Disbursement this Period

430.92

Transaction ID : VNH009R2CK3

Hotel

B. Hampton Inn and Suites

Mailing Address 25 Chapel St

City	State	Zip Code
Albany	NY	12210-2733

Purpose of Disbursement
Hotel

002

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2014

Amount of Each Disbursement this Period

487.72

Transaction ID : VNH009R2CM1

Hotel

c. HM Consulting

Mailing Address 113 W 118th St

City	State	Zip Code
New York	NY	10026-1844

Purpose of Disbursement
Website and Graphic Design

001

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		26		2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : VNH009RC634

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3418.64

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. HUNC PrintingMailing Address 161 W 140th St
Apt 9City State Zip Code
New York NY 10030-1713Purpose of Disbursement
T Shirts and Printing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

4700.00

Transaction ID : VNH009QB062

B. HUNC PrintingMailing Address 161 W 140th St
Apt 9City State Zip Code
New York NY 10030-1713Purpose of Disbursement
T shirts and Posters Printing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2014

Amount of Each Disbursement this Period

6948.00

Transaction ID : VNH009R2CP7

c. Inter Insurance Agency Services, LTDMailing Address 380 N Broadway
Ste 400City State Zip Code
Jericho NY 11753-2109Purpose of Disbursement
General Liability Insurance

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2014

Amount of Each Disbursement this Period

406.00

Transaction ID : VNH009Q4789

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

12054.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Inter Insurance Agency Services, LTDMailing Address 380 N Broadway
Ste 400

City Jericho State NY Zip Code 11753-2109

Purpose of Disbursement
General Liability Insurance

007

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	1	4

Amount of Each Disbursement this Period

528.00

Transaction ID : VNH009RC682

B. Interactive Visual SolutionsMailing Address 248 W 35th St
Rm 1205

City New York State NY Zip Code 10001-2505

Purpose of Disbursement
Staging Rental for Event

007

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	1	4

Amount of Each Disbursement this Period

4229.79

Transaction ID : VNH009Q3QN7

c. Ernesto Johnson

Mailing Address 894 Park Ave

City Brooklyn State NY Zip Code 11206-7302

Purpose of Disbursement
Entertainment for Campaign Event

007

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	1	4

Amount of Each Disbursement this Period

350.00

Transaction ID : VNH009QB0F3

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5107.79

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. MetroPCS

Mailing Address 1861 Lexington Ave

City	State	Zip Code
New York	NY	10029-2004

Purpose of Disbursement
campaign phones

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2014

Amount of Each Disbursement this Period

255.89

Transaction ID : VNH009RT054

B. MetroPCS

Mailing Address 1861 Lexington Ave

City	State	Zip Code
New York	NY	10029-2004

Purpose of Disbursement
campaign phones

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2014

Amount of Each Disbursement this Period

125.00

Transaction ID : VNH009RT062

c. MIST Harlem

Mailing Address 46 W 116th St

City	State	Zip Code
New York	NY	10026-2509

Purpose of Disbursement
Announcement event space

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		26		2014

Amount of Each Disbursement this Period

5995.49

Transaction ID : VNH009Q3CZ2

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6376.38

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB17

Transaction ID : VNH009Q3CZ2

Announcement event space

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. National Black Theater

Mailing Address 2031 5th Ave

City	State	Zip Code
New York	NY	10035-1503

Purpose of Disbursement
Event Space Rental

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		21		2014

Amount of Each Disbursement this Period

1650.00

Transaction ID : VNH009RC658

B. New Breed Task Force

Mailing Address 233 W 135th St

City	State	Zip Code
New York	NY	10030-2860

Purpose of Disbursement
Security for Campaign Event

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

Amount of Each Disbursement this Period

625.00

Transaction ID : VNH009QB088

C. New Heritage Films

Mailing Address 253 W 138th St

City	State	Zip Code
New York	NY	10030-0560

Purpose of Disbursement
camera crew for announcement event

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2014

Amount of Each Disbursement this Period

1600.00

Transaction ID : VNH009Q4706

camera crew for announcement event

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3875.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB17

Transaction ID : VNH009Q4706

camera crew for announcement event

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. New Heritage Films

Mailing Address 253 W 138th St

City	State	Zip Code
New York	NY	10030-0560

Purpose of Disbursement
video storage hard drive and editing

006

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2014

Amount of Each Disbursement this Period

600.00

Transaction ID : VNH009QAR82

video storage hard drive and editing

B. New York State Democratic CommitteeMailing Address 120 Broadway
Fl 32

City	State	Zip Code
New York	NY	10271-3299

Purpose of Disbursement
Voter Registration

003

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

Amount of Each Disbursement this Period

6656.80

Transaction ID : VNH009REZQ0

c. NGP VanMailing Address 1101 15th St NW
Ste 500

City	State	Zip Code
Washington	DC	20005-5006

Purpose of Disbursement
Online database

001

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2014

Amount of Each Disbursement this Period

2100.00

Transaction ID : VNH009Q3DE1

Online database

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9356.80

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB17

Transaction ID : VNH009QAR82

video storage hard drive and editing

Form/Schedule: SB17

Transaction ID: VNH009Q3DE1

online database initial payment

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Kwame Owusu-KesseMailing Address 408 W 57th St
Apt 3HCity State Zip Code
New York NY 10019-3016Purpose of Disbursement
Entertainment for Campaign Event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	25	2014

Amount of Each Disbursement this Period

330.00

Transaction ID : VNH009RT3E2

B. PayPal

Mailing Address 2211 N 1st St

City State Zip Code
San Jose CA 95131-2021Purpose of Disbursement
paypal merchant services fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	31	2014

Amount of Each Disbursement this Period

182.03

Transaction ID : VNH009RWYX4

c. Perception Audio-Visual Services IncMailing Address 424 W 33rd St
LL30City State Zip Code
New York NY 10001-2604Purpose of Disbursement
Audio Visual for Announcement Event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	27	2014

Amount of Each Disbursement this Period

3327.23

Transaction ID : VNH009Q3DC5

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3839.26

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Torian RobinsonMailing Address 5057 Broadway
Apt 25City State Zip Code
New York NY 10034-1121Purpose of Disbursement
Rembursement for inkind contributions

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2014

Amount of Each Disbursement this Period

266.88

Transaction ID : VNH009Q3D00

B. Staples

Mailing Address 105 W 125th St

City State Zip Code
New York NY 10027-4444Purpose of Disbursement
campaign supplies

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		14		2013

Amount of Each Disbursement this Period

81.60

Transaction ID : VNH009QARC3

[MEMO ITEM]

*

c. Staples

Mailing Address 105 W 125th St

City State Zip Code
New York NY 10027-4444Purpose of Disbursement
Campaign Supplies

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		14		2013

Amount of Each Disbursement this Period

48.96

Transaction ID : VNH009QARD1

[MEMO ITEM]

*

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

266.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
Campaign Supplies

006

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2014

Amount of Each Disbursement this Period

73.07

Transaction ID : VNH009QARA7

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Taxi

Mailing Address 3833B 29th St

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride

002

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2013

Amount of Each Disbursement this Period

20.00

Transaction ID : VNH009QB038

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

c. Sage Payment SolutionsMailing Address 1750 Old Meadow Rd
Ste 300

City	State	Zip Code
McLean	VA	22102-4304

Purpose of Disbursement
Merchant Services Fees

001

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2014

Amount of Each Disbursement this Period

106.42

Transaction ID : VNH009QRNY9

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

106.42

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Sage Payment SolutionsMailing Address 1750 Old Meadow Rd
Ste 300

City McLean State VA Zip Code 22102-4304

Purpose of Disbursement
Merchant Services Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

Amount of Each Disbursement this Period

691.98

Transaction ID : VNH009REZJ1

B. Sage Payment SolutionsMailing Address 1750 Old Meadow Rd
Ste 300

City McLean State VA Zip Code 22102-4304

Purpose of Disbursement
Merchant Services Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

402.27

Transaction ID : VNH009RWSN9

c. Sign11.comMailing Address 2730 N Berkeley Lake Rd NW
Ste B720

City Duluth State GA Zip Code 30096-1748

Purpose of Disbursement
Shipping Charges of Campaign Supplies

007

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

250.00

Transaction ID : VNH009Q3DD3

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

691.98

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
Printing and Copying

007

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

Amount of Each Disbursement this Period

39.20

Transaction ID : VNH009RC6G5

B. Staples

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
Campaign event expense

007

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

Amount of Each Disbursement this Period

14.79

Transaction ID : VNH009RC6K8

C. Staples

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
flyers

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

68.59

Transaction ID : VNH009R1110

flyers

SUBTOTAL of Disbursements This Page (optional).....

122.58

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 62 OF 78

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 105 W 125th St

City State Zip Code
 New York NY 10027-4444

Purpose of Disbursement
 campaign supplies

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
 02 / 04 / 2014

Amount of Each Disbursement this Period

6.53

Transaction ID : VNH009R1128

B. Staples

Mailing Address 105 W 125th St

City State Zip Code
 New York NY 10027-4444

Purpose of Disbursement
 printing

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
 02 / 08 / 2014

Amount of Each Disbursement this Period

829.63

Transaction ID : VNH009R10T4

C. Staples

Mailing Address 105 W 125th St

City State Zip Code
 New York NY 10027-4444

Purpose of Disbursement
 Printing and Copying

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
 02 / 09 / 2014

Amount of Each Disbursement this Period

1072.42

Transaction ID : VNH009R10V2

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1908.58

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
campaign supplies

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2014

Amount of Each Disbursement this Period

44.20

Transaction ID : VNH009R10W0

B. Staples

Full Name (Last, First, Middle Initial)

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
campaign supplies

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2014

Amount of Each Disbursement this Period

181.24

Transaction ID : VNH009R2CS1

C. Staples

Full Name (Last, First, Middle Initial)

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
printing

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2014

Amount of Each Disbursement this Period

90.58

Transaction ID : VNH009R2CT9

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

316.02

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
Campaign Supplies

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

25.54

Transaction ID : VNH009REZB5

B. Staples

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
Campaign Supplies

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

Amount of Each Disbursement this Period

45.68

Transaction ID : VNH009RC5R7

C. Staples

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
Campaign Supplies

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

Amount of Each Disbursement this Period

49.91

Transaction ID : VNH009REZC3

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

121.13

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
Campaign Supplies

006

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 02 / 2014

Amount of Each Disbursement this Period

76.76

Transaction ID : VNH009REZG5

B. Staples

Full Name (Last, First, Middle Initial)

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
Campaign Supplies

006

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 02 / 2014

Amount of Each Disbursement this Period

24.82

Transaction ID : VNH009REZH3

C. Staples

Full Name (Last, First, Middle Initial)

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
Campaign Supplies

006

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 05 / 2014

Amount of Each Disbursement this Period

199.73

Transaction ID : VNH009REZR8

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

301.31

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
printing supplies

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2014

Amount of Each Disbursement this Period

130.64

Transaction ID : VNH009RGH28

B. Staples

Full Name (Last, First, Middle Initial)

Mailing Address 105 W 125th St

City	State	Zip Code
New York	NY	10027-4444

Purpose of Disbursement
supplies

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2014

Amount of Each Disbursement this Period

55.91

Transaction ID : VNH009RT070

c. Style Cameo

Full Name (Last, First, Middle Initial)

Mailing Address 5304 Bexar St

City	State	Zip Code
Dallas	TX	75215-4933

Purpose of Disbursement
Logo Design

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : VNH009Q0JF5

Logo Design

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

686.55

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 68 OF 78

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M / D D / Y Y Y Y
01 / 25 / 2014

City State Zip Code
Long Island City NY 11101-2714

Amount of Each Disbursement this Period

15.00

Purpose of Disbursement
Taxi Ride

002

Transaction ID : VNH009QAR99

Candidate Name

Category/
Type

[MEMO ITEM]

*

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M / D D / Y Y Y Y
02 / 11 / 2014

City State Zip Code
Long Island City NY 11101-2714

Amount of Each Disbursement this Period

14.50

Purpose of Disbursement
Taxi Ride

002

Transaction ID : VNH009R10Z4

Candidate Name

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

c. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M / D D / Y Y Y Y
02 / 11 / 2014

City State Zip Code
Long Island City NY 11101-2714

Amount of Each Disbursement this Period

18.50

Purpose of Disbursement
Taxi Ride

002

Transaction ID : VNH009R1102

Candidate Name

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

33.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride from Event

002

Amount of Each Disbursement this Period

7.50

Transaction ID : VNH009R2CQ5

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride

002

Amount of Each Disbursement this Period

16.50

Transaction ID : VNH009R2CR3

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		23		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride from Volunteer Event

002

Amount of Each Disbursement this Period

26.00

Transaction ID : VNH009RZ0M4

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

50.00
56.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 70 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride

002

Amount of Each Disbursement this Period

7.80

Transaction ID : VNH009RC5P1

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride for Volunteers

002

Amount of Each Disbursement this Period

18.00

Transaction ID : VNH009RC5T3

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride from Event

002

Amount of Each Disbursement this Period

25.50

Transaction ID : VNH009REZM7

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

51.30

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride for Volunteers

002

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

Amount of Each Disbursement this Period

50.00	25.10
-------	-------

Transaction ID : VNH009REZN4

B. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride

002

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

Amount of Each Disbursement this Period

50.00	19.00
-------	-------

Transaction ID : VNH009RZ4V5

c. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride

002

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

Amount of Each Disbursement this Period

50.00	7.00
-------	------

Transaction ID : VNH009RZ4W3

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

51.10

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride from Event

002

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

Amount of Each Disbursement this Period

8.30

Transaction ID : VNH009RT039

B. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride from Event

002

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

Amount of Each Disbursement this Period

25.70

Transaction ID : VNH009RT047

c. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		27		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride from Event

002

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

Amount of Each Disbursement this Period

13.10

Transaction ID : VNH009RZ0B3

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

47.10

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		27		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride from Event

002

Amount of Each Disbursement this Period

9.50

Transaction ID : VNH009RZ0C1

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		28		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride to Fundraiser

007

Amount of Each Disbursement this Period

26.00

Transaction ID : VNH009RT096

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride from Fundraiser

002

Amount of Each Disbursement this Period

16.00

Transaction ID : VNH009RTHM8

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

51.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Taxi

Mailing Address 3833B 29th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2014

City	State	Zip Code
Long Island City	NY	11101-2714

Purpose of Disbursement
Taxi Ride for Volunteers

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

13.00

Transaction ID : VNH009RTHK0

B. The BoscoMailing Address 1182 Flushing Ave
308

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

City	State	Zip Code
Brooklyn	NY	11237-1747

Purpose of Disbursement
Campaign event expense

007

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

1036.42

Transaction ID : VNH009Q7SD0

c. the park 112

Mailing Address 2080 Frederick Douglass Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2014

City	State	Zip Code
New York	NY	10026-3483

Purpose of Disbursement
Food and Gratuity

007

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

675.03

Transaction ID : VNH009RZ063

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1724.45

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB17

Transaction ID : VNH009Q7SD0

Campaign event expense

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 78

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Michael WalrondMailing Address 1485 5th Ave
Apt 18JCity State Zip Code
New York NY 10035-2778Purpose of Disbursement
Signs for Campaign EventCandidate Name
Michael Walrond

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: NY District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

1197.55

Transaction ID : VNHZ8C65A99I

* In-Kind Received

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	---	--

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	---	--

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1197.55

65589.21

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 77 OF 78

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walrond for Congress

Full Name (Last, First, Middle Initial)

A. Donald Coleman

Mailing Address 45 Park Ave
Apt 401

City State Zip Code
New York NY 10016-3488

Purpose of Disbursement
Paypal refunded funds for security purposes. Fraud prevention

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 07 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : VNH009Q7E71

Paypal refunded funds for security purposes. Fraud prevention

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

1000.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB20A
Transaction ID : VNH009Q7E71

Paypal refunded funds for security purposes. Fraud prevention

Form/Schedule:
Transaction ID: